# ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate le	evel produced by rate revision effective	11/01/2006
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
<ol><li>Liability Other Than Auto</li></ol>		
<ol> <li>Burglary and Theft</li> </ol>		
5. Glass		
6. Fidelity	207,712	-9.7
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	<u> </u>	
13. Commercial Multi-Peril		
14. Crop Hail		
15. OtherLine of Insurance		
	(territories) or certain classes? If so, specify:	<u>No</u>
Brief description of filing. (If filing follow America	s rates of an advisory organization, specify	organization): Surety Association of
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	which will result from application of new rates  Colonial An	nerican Casualty & Surety Name of Company ik/Regulatory Services Analyst
		Official – Title
		Cinosa IIIO



# **ILLINOIS DEPARTMENT OF INSURANCE**

Change in Company's premium or rate level produced by rate revision effective		11/01/2006	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private			
Passenger Commercial			
2. Automobile Physical Damage			
Liability Other Than Auto			
4. Burglary and Theft			
5. Glass			
6. Fidelity	2,206,557	-10.0	
7. Surety _			
8. Boiler and Machinery			
9. Fire			
10. Extended Coverage			
11. Inland Marine			
12. Homeowners			
13. Commercial Multi-Peril	<del></del>		
· -			
15. OtherLine of Insurance	<u></u>		
Line of Insurance			
Does filing only apply to certain territory (te	erritories) or certain classes? If so, specify:	No	
Brief description of filing. (If filing follows America	rates of an advisory organization, specify	organization): Surety Association of	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level wh	ich will result from application of new rates	i <b>.</b>	
	Fidalik. 0	Denosit Co of Mandand	
		Deposit Co of Maryland Name of Company	
	Patricia E. Chud	ik/Regulatory Services Analyst Official – Title	



# **ILLINOIS DEPARTMENT OF INSURANCE**

Change in Company's premium or rate level	produced by rate revision effective	November 15, 2006
(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ <u>or -)**</u>
OOVERAGE	volume (illinois)	<u> </u>
Automobile Liability Private     Passenger Commercial		
Automobile Physical Damage     Private Passenger Commercial		
Liability Other Than Auto		05.00/
Burglary and Theft	1366	-25.0%
5. Glass		0.00/
	6915	-6.3%
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine	· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	<u> </u>	
15. Other		
Line of Insurance		
Does filing only apply to certain territory (terri	tories) or certain classes? If so, specify	: <u>No</u>
Brief description of filing. (If filing follows rat ISO loss costs from CR-2005-RLA1.	es of an advisory organization, specify	
*Adjusted to reflect all prior rate changes.		
**Change in Company's premium level which	will result from application of new rate	<b>3</b> .
	Milwaukee C	asualty Insurance Company Name of Company
	Bureau & F	orms Compliance Manager
		Official - Title



# ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate level	produced by rate revision effective	November 15, 2006
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercial		
Liability Other Than Auto		
Burglary and Theft	2524	-25.0%
5. Glass		
6. Fidelity	7462	-6.3%
7. Surety		
Boiler and Machinery	mer i e mer i e e e e e e e e e e e e e e e e e e	
9. Fire		
10. Extended Coverage		
11. Inland Marine	10 10 10 10 10 10 10 10 10 10 10 10 10 1	
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Line of insurance		
Does filing only apply to certain territory (terri	tories) or certain classes? If so, specify:	No
Brief description of filing. (If filing follows rat ISO loss costs from CR-2005-RLA1.	es of an advisory organization, specify	•
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which	will result from application of new rates	
	Milwauk	ee Insurance Company
		Name of Company
	Bureau & Fo	orms Compliance Manager
		Official – Title



# ILLINOIS DEPARTMENT OF INSURANCE

### **SUMMARY SHEET**

Change in Company's premium or rate level	produced by rate revision effective	November 15, 2006
(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
3. Liability Other Than Auto	11529	-25.0%
4. Burglary and Theft 5. Glass	11329	-23,070
6. Fidelity	36451	-6.3%
7. Surety	30431	0.070
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail	· · · · · · · · · · · · · · · · · · ·	
15. Other		
Line of Insurance		
Does filing only apply to certain territory (terr	ritories) or certain classes? If so, specify:	<u>No</u>
Brief description of filing. (If filing follows ra ISO loss costs from CR-2005-RLA1.	ites of an advisory organization, specify	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level whicl	h will result from application of new rates	·.
	Taimite et laite	areal Ingurance Company
	i rinity Univ	ersal Insurance Company Name of Company
	Bureau & Fo	orms Compliance Manager
		Official – Title

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

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SPRINGFIELD, ILLINOIS

# ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate leve	produced by rate revision effective	November 15, 2006
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
Liability Other Than Auto		05.00/
4. Burglary and Theft	6206	25.0%
5. Glass	0	-6.3%
6. Fidelity		
7. Surety 8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory (ter		
Brief description of filing. (If filing follows ra	ates of an advisory organization, specif	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which	h will result from application of new rate	es.
	Security N	ational Insurance Company Name of Company
	Bureau & F	Forms Compliance Manager Official – Title

